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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration
Submitted With Initial
Filing **OR** ☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number 3385.1

First Named Inventor Ron T. Shigeta, Jr.

COMPLETE IF KNOWN

Application Number /

Filing Date 2/26/02

Group Art Unit TBD

Examiner Name TBD

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NUCLEIC ACID ENCODING GROWTH FACTOR PROTEIN

the specification of which (Title of the Invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:** Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	22886	OR	<input type="checkbox"/> Correspondence address below
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name Ron T. (first and middle [if any])			Family Name Shigeta, Jr. or Surname		
Inventor's Signature <i>R T Shigeta Jr</i>			Date <i>02/21/02</i>		
Berkeley		CA	USA	USA	
Residence: City		State	Country	Citizenship	
1313 San Pablo Avenue, #1					
Mailing Address					
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City		State	Zip	Country	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name Michael A. (first and middle [if any])			Family Name Siani-Rose or Surname		
Inventor's Signature <i>Michael A. Siani-Rose</i>			Date <i>02/21/02</i>		
San Francisco		CA	USA	USA	
Residence: City		State	Country	Citizenship	
341 Day Street					
Mailing Address					
San Francisco		CA	94131	USA	
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<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					



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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	(unassigned)
Filing Date	Herewith
First Named Inventor	Ron T. Shigeta, Jr.
Group Art Unit	TBD
Examiner Name	TBD
Attorney Docket Number	3385.1

I hereby appoint:

☐ Practitioners at Customer Number
ORPlace Customer
Number Bar Code
Label here☒ Practitioner(s) named below:

Name	Registration Number
Philip L. McGarrigle	31,395
Wei Zhou	44,419
Man Sung Co	42,423
Alan Sherr	42,147

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.
OR☒ Practitioners at Customer Number 22886
OR☒ Firm or
Individual Name Affymetrix, Inc.

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Country USA

Telephone 408-731-5000 Fax 408-731-5392

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name Barbara A. Caulfield

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of forms are submitted.